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## APPLICANTS

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\*\* CONTINUING DATA \*\*\* *Yes* *hm* \*\*\*\*\*

This appln claims benefit of 60/399,317 07/26/2002  
 and claims benefit of 60/460,154 04/03/2003

\*\* FOREIGN APPLICATIONS *None* *hm* \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY WA	SHEETS DRAWING 28	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>Hunt</i> Examiner's Signature	<i>Mar</i> Initials		

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## TITLE

Electronically enabled eyewear

FILING FEE  RECEIVED 880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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